Statement of Contributions Received
at a Social or Fund-Raising Event

Prescribed by Secretary of State 03/05

Name of Committee in Full								
The Central Ohio Restaurant Association Political Action Committee								

Full Name of Contributor				Registration Number, if PAC				
Bruce Lackey								
Street Address	Employer/Occupation/Labor Organization*		M	D	Y	Amount		
2689 Lewis Center Way	Restaurant owner		1 0	1 1	1 1	$50.00		
City	State	Zip Code	Form (Cash, Check, etc.)					
Urbancrest	OH	43123	credit card payment					

Full Name of Contributor				Registration Number, if PAC				
Jeff Rains								
Street Address	Employer/Occupation/Labor Organization*		M	D	Y	Amount		
2400 Harrison Road, Suite A	Restaurant owner		1 0	1 1	1 1	$50.00		
City	State	Zip Code	Form (Cash, Check, etc.)					
Columbus	OH	43204	credit card payment					

Full Name of Contributor				Registration Number, if PAC				
Street Address	Employer/Occupation/Labor Organization*		M	D	Y	Amount		
City	State	Zip Code	Form (Cash, Check, etc.)					
	OH							

Full Name of Contributor				Registration Number, if PAC				
Street Address	Employer/Occupation/Labor Organization*		M	D	Y	Amount		
City	State	Zip Code	Form (Cash, Check, etc.)					
	OH							

Full Name of Contributor				Registration Number, if PAC				
Street Address	Employer/Occupation/Labor Organization*		M	D	Y	Amount		
City	State	Zip Code	Form (Cash, Check, etc.)					
	OH							

Full Name of Contributor				Registration Number, if PAC				
Street Address	Employer/Occupation/Labor Organization*		M	D	Y	Amount		
City	State	Zip Code	Form (Cash, Check, etc.)					
	OH							

Full Name of Contributor				Registration Number, if PAC				
Street Address	Employer/Occupation/Labor Organization*		M	D	Y	Amount		
City	State	Zip Code	Form (Cash, Check, etc.)					
	OH							

* Required for contributions from individuals over $100 to statewide and General Assembly candidates. If contributor is self-employed, the occupation and the name of the individual's business, if any, rather than employer should be listed. If two or more employees contribute via payroll deduction and exceed the aggregate of $100, the labor organization of which the employees are members, if any, must also appear. [R.C. 3517.10(B)(4)]

Fill in the boxes below only on the last page for this event.
Transfer the Total contributions for this event to form No. 31-A. Under Full Name of Contributor state "Contributions from form No. 31-E" and list the date of the event in the date column

Total contributions this event

$2,373.37

Total expenditures this event.

$554.40

Page Total $ $100.00